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LETTERS TO THE EDITOR



[The Editor is not responsible for opinions expressed in this Department.]

CARE OF NIPPLES DURING PREGNANCY

DEAR EDITOR: Replying to the question of M. I. M. in the June JOURNAL, every one caring for pregnant women has her own opinion regarding the care of the nipples before childbirth. My opinion is that *absolute cleanliness* is the first consideration, then if there is *abnormal* soreness, the use of a 2 per cent. solution boracic acid, followed by sterile water, and, when thoroughly dry, the application of a good cold cream, will in the majority of cases give relief and good result during the nursing period.

I do not approve of *hardening* the nipples, although good authorities advise it. My experience in such cases has been the cracking of the nipples as soon as nursing began.

FRANCES MYLES, R.N.

Dansville, N. Y.

A REPLY

DEAR EDITOR: I feel that I cannot let "A Plea for Equal Rights" by "Always a Private Duty Nurse" in the June number pass without comment.

It would seem quite evident that "Always a Private Duty Nurse" was not present at the convention held in New York City in May, 1910, or she would have seen that she is somewhat mistaken in her impression that the private duty nurse is not a representative factor at the conventions. At the afternoon devoted entirely to the discussion of the subject of private nursing, with its many problems, the chairman, Miss DeWitt, asked those engaged in private work to rise, merely as a matter of curiosity to see how many there were in the audience to whom this session would particularly appeal, and it was probably a revelation to those present that a very large majority of those in convention arose as private duty nurses. This incident would seem to refute the fact that the superintendents represent the profession at the Associated Alumnae, or the American Nurses' Association, as we are now to be known.

It would seem that any private duty nurse who was honored by being chosen to represent her alumnae and have the privilege of attending a convention at its expense would never question giving her time. This interest is manifested by the number who attend the convention every year as visitors, feeling themselves privileged to attend at their own expense; and as for the superintendent's income going on while she is in convention, how many superintendents all over the country attend the superintendents' convention entirely at their own expense considering that they cannot afford to miss these meetings, even at considerable cost to themselves? Indeed it is a question whether hospital boards would not find it money well invested to send their superintendents in view of the broadening effect and the educational value which they receive, and bring back to their training schools.

It is unfortunate that "Always a Private Duty Nurse" has had the experience with the "big stick" and the "wire pulling" she quotes, but we cannot believe that it is a representative condition of the country.

Our superintendents are striving for the best for their training schools and the profession, and struggling frequently for the attainment of these ideals against almost overwhelming odds. They must have the advancement of the profession at heart and a love for their training schools or they would not be in such positions, for the salary alone would never compensate for the responsibility resting on the superintendent's shoulders.

It does not seem that anyone could attend the convention of the American Nurses' Association without being impressed by the wonderful women who direct the nursing affairs of the country, and we are very justly proud of them. These women have not risen to their position by "wire pulling" but by demonstrating their ability in doing well their task as it came to them, and always working for the advancement of their profession. They have been put there by their co-workers—the nurses of the United States.

I have done private duty for several years and have never been a superintendent but neither in training or subsequent work have I met the experience of "Always a Private Duty Nurse," and I cannot believe that it is representative, and I also believe that anyone who has had the privilege to attend the national conventions will agree with me.

STELLA K. KENNY, R.N.

Brooklyn, N. Y.

TRIED RECIPES

DEAR EDITOR: I have found that many graduate nurses and practising physicians do not know how to properly prepare beef broth, beef tea, beef juice, and gruels, and have thought it might be of practical value to many readers of your JOURNAL if directions were published. I here inclose a copy of my own recipes, which I have used for many years and know their value.

OATMEAL GRUEL

Soak one-half a cup of rolled oats in three cups of cold water for thirty minutes. Stir thoroughly and strain off the liquor, being careful not to allow any particles of the oats to pass through the strainer. Place the liquor in a double boiler, or in a dish set in a pan of boiling water, stir constantly until it thickens, and cook two hours; salt to taste; add cream or milk, and serve. This may be given to little children who cannot eat cooked oatmeal because of its action on the bowels.

BEEF BROTH

Three pounds of beef cut from the round, cut in inch pieces, place in a kettle containing three quarts of cold water and one level teaspoon of salt, let stand thirty minutes. This extracts some of the juices. Place the kettle on a very slow fire, and let simmer, not boil, for two hours, then gradually increase the heat to a gentle boil, and boil slowly for three hours or longer, until the liquor is reduced one-half. Strain, cool and skim off every particle of fat. If directions are carefully followed, there should be one and one-half quarts of thick jelly broth.